NATIONAL COUNCIL FOR HOTEL MANAGEMENT & CATERING TECHNOLOGY
A-34, Sector- 62, NOIDA-201 309

MARKS VERIFICATION FORM–SEMESTER I
(FOR NCHMCT COMPONENTS ONLY)

> **LAST DATE FOR FORM SUBMISSION IN THE INSTITUTE:**
> **14th March 2025**
> (Applications received after the last date will not be accepted)

1. Name in BLOCK letters : _____
   (As in ADMIT CARD)
2. NCHM&CT Roll No. : _____
3. Institute Name : _____
4. Student's Address : _____
   _____
   _____
   _____Pin: _____
5. Email id : _____
6. Mobile No. : _____

S/No	Subject(s) for Verification				Marks obtained
	Subject Code	Subject Name	Theory	Practical	
1					
2					
3					
4					
5					
6					
7					

FEE:Rs.300/-per subject (Forwarded to NCHMCT)

Candidate's signature   Principal's Signature with stamp

Date:_____